

**“THERE OUGHTA BE A LAW...OR NOT”
19th ASSEMBLY DISTRICT
APPLICATION FORM**

*Please return to the Office of Assemblymember Jerry Hill via e-mail at:
assemblymember.hill@assembly.ca.gov*

Name: _____

Address _____

City, Zip Code _____

Phone: _____ Cell Phone: _____

Fax: _____ E-mail: _____

WHAT’S THE PROBLEM THAT NEEDS A LEGISLATIVE SOLUTION?

WHAT’S YOUR SOLUTION? Please attach proposed language, if any. Be as detailed as possible, attaching extra sheets if needed.

BACKGROUND INFORMATION Please include any studies, reports, newspaper articles, personal experience, or anecdotal evidence relating to your proposal.

ARE YOU AWARE OF SIMILAR LEGISLATION PREVIOUSLY INTRODUCED IN CALIFORNIA OR IN OTHER STATES? If so, please include the author, bill number, and outcome of the legislation:

PLEASE DESCRIBE ANY FINANCIAL IMPACTS (i.e., costs, savings, or revenue) YOU ANTICIPATE MAY BE ASSOCIATED WITH YOUR PROPOSAL:

WHO DO YOU THINK WOULD SUPPORT THE BILL?

WHO DO YOU THINK WOULD OPPOSE THE BILL?

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